

HWI-MB

PF-2010-01321

CALIFORNIA DEPARTMENT OF INSURANCE

FILING COVER SHEET

for

FORMS FILINGS with the POLICY APPROVAL BUREAU

(Suggested for use as the cover letter required by Title 10, California Code of Regulation §2205 for filings of policy forms in the DOCUMENT CLASSES listed below. Other DOCUMENT CLASSES are filed with other Department Bureaus per §2206.)

TO: California Department of Insurance Policy Approval Bureau 45 Fremont Street San Francisco, CA 94105	FROM: (Official Insurer Name): Health Net Life Insurance Company
	Submitter and Complete Mailing Address: Health Net Life Insurance Company Paul Sedgwick/Director, Regulatory Compliance 11971 Foundation Place Rancho Cordova, California 95670
	Submission Date: July 12, 2010

1. IDENTIFYING FORM NUMBER(S): P32301 (CA 06/06) – rate filing effective September 1, 2010

[The form number(s) of one or more of the documents submitted by which the filing can be identified. §2205(a)]

2. DOCUMENT CLASS [The subdivision of §2202(a) which best describes the forms submitted. §2205(b)]

Generic Description and Definition Citation	Check Below	Generic Description and Definition Citation	Check Below
"Health Insurance" [§2202(a)(1)]	X	"Credit Life and Disability" [§2202(a)(6)]	
"Group and Blanket Life and Non-health Disability" [§2202(a)(2)]		"Supplemental Life Benefits" [§2202(a)(7)]	
"Individual Disability, Non-health" [§2202(a)(3)]		"Variable Life and Annuities" [§2202(a)(8)]	
"Medicare Supplement" [§2202(a)(4)]		"Fraternal" [§2202(a)(9)]	
"Long-term Care" [§2202(a)(5)]		"Unclassified" * [§2202(a)(11)]	
* Describe briefly:			

3. GROUP AND/OR INDIVIDUAL [Are the forms group, individual or used in both contexts? §2205(b)]

Group Only:	Individual Only: X	Group AND Individual:
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4. EMPLOYER SIZE (Employer Health Insurance Only) [Where the forms submitted provide health coverage through employment, the minimum and the maximum sizes of the employers in terms of number of employees. §2205(c)]

2 to 50 Employees:	Over 50 Employees:	All Employers:
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5. REPLACES PREVIOUSLY-APPROVED DOCUMENT(S)? [Do any documents replace previously-approved Documents 2205(d)] Yes, replaces rate filing, effective July 1, 2009, acknowledged for use by the California Department of Insurance on March 4, 2009 (DOI file# PF-2009-00296).

JUL 14 2010

6. FINAL PRINT FORM? [Whether each document is in draft, printer's proof, or the final printed form for issue to insureds. §2205(e)]

Document(s)	Draft?	Printer's Proof?	Final Print?
N/A			

7. TYPE OF DOCUMENT WITH WHICH IT WILL BE USED [For each document (such as a rider) which is designed to be used with another document not included in the filing, a statement of the document class with which it is to be used. §2205(f)]

Document Form Number	Document Class (from Item 2, above)
N/A	

8. MASTER POLICY FORM NUMBER AND APPROVAL DATE: P32301 (CA 06/06); November 17, 2006.

[Where a certificate is submitted for use with a previously approved "group" document, the form number and the filing or approval date of the previously approved group document. §2205(g)]

9. IF ABOVE INFORMATION CANNOT BE FURNISHED, EXPLAIN WHY. [If the submitter is unable to furnish the information requested above, explain why. §2205(h)]

10. IS A RECEIPT ACKNOWLEDGMENT CARD ENCLOSED? NO

[Submitters wanting acknowledgment of receipt of their filings must include a self-addressed, postage pre-paid postcard or letter for return when the filing is received. Acknowledgments must be drafted so that Department personnel need only enter dates of receipt before mailing. §2205(j)]

11. REMARKS AND ADDITIONAL INFORMATION (Attach additional sheets if necessary):

Rate filing effective September 1, 2010 for new and renewal business.

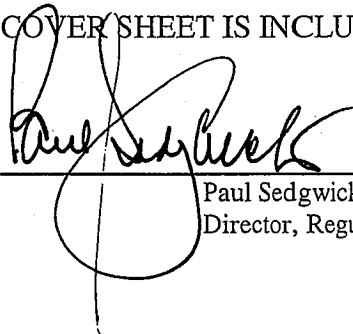
MAKE SURE THAT A COMPLETED 3-PART DOCUMENT SUBMISSION FORMSET IS INCLUDED

[Filings of documents described in §2202(a)(1) through (a)(11) shall include three-part Document Submission Formsets. §2216(a)]

MAKE SURE THAT A STAMPED, RETURN ADDRESSED ENVELOPE IS INCLUDED [The cover letter shall be accompanied by a stamped, self-addressed business-size return envelope. §2205(i)]

MAKE SURE THAT A DUPLICATE FILING COVER SHEET IS INCLUDED [All document submissions must be accompanied by a cover letter in duplicate. §2205]

SUBMITTER'S SIGNATURE AND TITLE:



Paul Sedgwick
Director, Regulatory Compliance

CALIFORNIA DOCUMENT SUBMISSION FORMSET

California Insurer Number: 3173-2 (NOT NAIC Number)		FOR DEPARTMENT USE ONLY		
Official Insurer Name: Health Net Life Insurance Company		Our File #		Fee Code:
Submitter and Complete Mailing Address: Paul Sedgwick Director, Regulatory Compliance Health Net Life Insurance Company 11971 Foundation Place Rancho Cordova, CA 95670		Reviewer:		
Submission Date: <u>July 12, 2010</u>		Dept Action Date:		
Document Form Number	Doc Type (“Policy,” etc)	Document Coverage	Department Action	Fee
1 <i>Rates & Actuarial Certification for form P32381 (CA 06/06)</i>	<i>Initial Rates and Renewal Rates effective September 1, 2010</i>			
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INSTRUCTIONS: Complete the part of the form to the left of the double vertical line. Enter one document to a numbered line. Use additional formsets if necessary. Be accurate - the copy of this form that we return to you will be your only record of our action on your submission.

THIS IS NOT A BILL - DO NOT PAY. YOU WILL RECEIVE A SEPARATE FILING FEE INVOICE SHORTLY; REMIT FEES ONLY WITH THAT INVOICE.

Total \$

Cont'd on __ Pages



MEMO

TO: California Department of Insurance
FROM: Mark E. Bean, ASA, MAAA
DATE: July 12, 2010
RE: Executive Summary: Actuarial Certification of Health Net Life Insurance Company Individual PPO Rate Increase Effective September 1, 2010

Policy Number: P32301 (CA 06/06)

The purpose of this memo is to provide a summary of our proposed change in premium rates to our Salud Individual PPO plans to be effective for September 1, 2010. The required change in the base rates is 53.8%; however, we are only requesting an overall average rate increase of 20.0%.

Our loss ratio for the experience period (1/1/09-12/31/09) is 95.9% and our historical loss ratio for years 2006-2009 is 91%. We have projected our future loss ratio to be 83% and our lifetime loss ratio is projected to be 78%. The requested premium rate increase meets the loss ratio requirements under California law.

The main justification for our rate increase is mainly based on two factors. The first factor is our overall average medical trend is approximately 15% and is a composite of the following factors: unit cost, utilization, deductible leveraging, and risk margin. Medical inflation continues to be much higher than the overall average inflation rate. The second factor is that experience continues to deteriorate.

We are ready to answer any questions that the Department of Insurance or others may have concerning our filing in order to implement these rates in a timely manner.

Sincerely,

Mark E. Bean

Mark E. Bean, ASA, MAAA
11971 Foundation Place
Rancho Cordova, CA 95670
Phone: (916) 935-1102
Fax: (916) 935-4407

July 12, 2010
Date

RATE FILING TABLE OF CONTENTS

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- Policy Description
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- Rating Region Definitions
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Section 1 – IFP PPO Salud Plan Rates with and without Dental/Vision

Exhibit 1 display rates by region, plan, family tier, and the primary insured's age band for the Salud plans.



MEMORANDUM

TO: California Department of Insurance

FROM: Mark E. Bean, ASA, MAAA

DATE: July 12, 2010

RE: Actuarial Certification of Health Net Life Insurance Company Individual PPO Rate Increase Effective September 1, 2010

Policy Number: P32301 (CA 06/06)

This memorandum provides actuarial certification of premium rates effective beginning September 1, 2010.

I, Mark E. Bean, am associated with Health Net Inc., the parent company of Health Net Life Insurance Company. I am a member of the American Academy of Actuaries and meet its qualifications for actuarial certification of medical premium rate filings. I have reviewed the enclosed premium rates for the Individual PPO plans described below.

In my analysis of the rates, I relied upon financial records and summaries prepared by responsible officers and employees of Health Net Life. In other respects, my analysis included such review of the assumptions as I considered necessary.

For preparation of the rates, items identified below:

- (i) are computed in accordance with commonly accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;
- (ii) meet the requirements of the laws of the State of California;
- (iii) make a good and sufficient provision for all unpaid claims of the organization under the terms of its contracts and agreements; and
- (iv) include appropriate provision for all actuarial items which ought to be established.

Policy Description

All policy forms are for conditionally renewable individual major medical coverage.

Rate Development

Premium rate development is based upon estimated health care cost expense per insured per month. Health care expense estimates were based on Health Net Life Individual PPO experience. The experience period is January 1, 2009 to December 31, 2009 and the rating period is September 1, 2010 to August 31, 2011.

Note that if the rate increase is delayed beyond September 1, these rates will need to be adjusted at a rate of 1.2% per month plus the impact of health care reform. The rates will adjusted based on the month that the rate increase is implemented. The impact of health care reform on grandfathered plans is expected to be 1% because dependents will be covered up to age 26 and the removal of the following: 1) lifetime maximum; 2) limits for essential benefits.

Table 1 shows the required rate change based on trending the experience period claims to the midpoint of the rating period. The number of months of trend is determined by the difference between the midpoint of the rating period to the midpoint of the month the claim was incurred. Adjusted revenue was calculated using rates as of our last rate filing July 1, 2009. The calculated required rate increase 53.8% but the proposed rates in this filing result in an overall average rate increase of 20.0%. The justification for the rate increase is due to increases in the cost of providing care (medical trend) and utilization (claim experience) higher than expected.

Table 1
Required Base Rate Change

Experience Period Beginning Ending	1/1/2009 12/31/2009
Membership - 7/1/2010	787
Member Months	12,087
Revenue	\$1,797,828
Total Claims	\$1,724,343
Loss Ratio	95.9%
Adjusted Revenue (Using 7/09 Rates)	\$1,945,828
Trended Claims	\$2,140,524
Required Revenue	\$2,992,948
Target Loss Ratio	71.5%
Required Rate Increase	53.8%
Requested Rate Increase	20.0%
Expected Loss Ratio	91.7%

Notes:

1. Experience period revenue includes revenue for the Dental & Vision rider.
2. Experience period claims includes costs for the Dental & Vision rider.
3. Adjusted revenue excludes revenue for the Dental & Vision rider.
4. Trended claims excludes costs for the Dental & Vision rider.

Medical Trend Factors:

1. Unit Cost: 8.96%
2. Utilization: 2.40%
3. Risk Margin: 2.0%
4. Deductible Leveraging: 0% to 2.3% (Based on the deductible)
5. Pharmacy Trend Factors - 12.5%
6. Combined average trend – 15.33%

The unit cost, utilization, risk margin, and deductible leveraging factors are compounded in order to get the base trend factor.

Justification for the Medical Trend Components

- Determination of the Medical Trend: Based on expected changes in our provider contracts and increases in utilization $[(1.086) \times (1.024) - 1] = 11.58\%$.
- Risk Margin of 2%: This is reasonable based on the risk taken.
- Medical Deductible Leveraging: Based on the July 2009 Milliman Guidelines p. 7.7 - Deductible Leveraging Factors for Comprehensive Major Medical with No-of-Pocket Max

	Plan Deductible							
	\$0	\$500	\$750	\$1,000	\$1,500	\$2,000	\$2,500	\$5,000
Leveraging Factor	1.00	1.05	1.07	1.09	1.12	1.15	1.17	1.26
HN Unit Cost Trend	8.96%	8.96%	8.96%	8.96%	8.96%	8.96%	8.96%	8.96%
Leveraging Trend	0.0%	0.4%	0.6%	0.8%	1.1%	1.3%	1.5%	2.3%

- Historical combined average annual trend for the years of 2007–2009 averaged 16.7%.
- Medical Deterioration is set to 0%. Although the impact of medical deterioration will be greater than 0%, we are using 0% in our calculation to reduce the needed premium increase. Using a factor greater than 0% would lead to a higher needed premium increase.

Area Factors

At this time there are no changes to the area factors.

Health Care Reform

The proposed rate increase does not include any benefit changes due to health care reform.

Experience

Table 2 shows our annual experience for 2009 and the overall medical loss ratio (MLR) is 96%.

Table 2
Experience

Plan Grouping	Current Members Jul-10	Average # of Insureds	Cy2009		
			Premium	Total HCC	MLR
Salud	787	1,007	\$149	\$143	96%

Proposed Rate Increase

Table 3 shows the proposed rate increase for each plan for September 1, 2010 as well as the rate history for each plan back to August 2003.

Table 3
Proposed Rate Increase for September 1, 2010 and Rate History

Plan	Proposed 9/10	History of Rate Increases			
		7/09	7/08	7/07	7/06
Salud PPO 15	20.0%	19.0%	15.0%	--	--
Salud PPO 15/25%	20.0%	19.0%	15.0%	--	--
Salud PPO 25	20.0%	19.0%	15.0%	--	--
Total	20.0%	20.0%	20.0%	--	--

Historical & Forecasted Medical Loss Ratio

Table 4 shows the actual historical experience for the Salud Affordable IFP PPO plans. The overall MLR for these plans is 91%.

Table 4 – Historical Experience

Year	Member Months	Premium	Health Care Costs	MLR
2006	1,077	\$119,233	\$57,583	48%
2007	3,464	\$399,377	\$195,970	49%
2008	12,497	\$1,571,872	\$1,567,123	100%
2009	12,087	\$1,797,828	\$1,724,343	96%
Total	29,125	\$3,888,309	\$3,545,019	91%

For credibility purposes, data for Policy Number P32301 has been combined with P30601 (All Versions) and Policy Number P32301 (CA 06/06) were combined together in Table 5 and 6.

The overall historical loss ratio from January 1, 2000 through December 31, 2009 is as follows:

- 77% based on the present value discounted at an annual rate of 0%
- 76% based on the present value discounted at an annual rate of 5%

Please note that 7 out of the 10 years shown in the Historical section in Table 5 had loss ratios above 70%.

The overall future anticipated loss ratio is expected to be 83% for years 2010 to 2020 and the lifetime loss ratio is expected to be 78% and is shown in Table 5. This demonstrates that we are in compliance with California Code of Regulations 2222.12.

Key assumptions in developing the future anticipated loss ratio:

1. Claims Trend (excluding duration) for 2010 is 15%.
2. Claims Trends (excluding duration for 2011-2020 is 8%. Please note that we expect future trends to be greater than 8% and we intend to adjust our rates according to actual trends. The 8% is used for illustration purposes only.
3. New sales are only through 2010.
4. Expected Rate Increases:
 - September 2010 – 16.4%
 - September 2011 – 10%
 - September 2012 – 10%
 - 2013-2020 – 8%
5. Discount Rate: 5%
6. Lapse Rate (Monthly): 3%

Table 5
Historical Loss Ratio

Historical

Year	Member Months	Health Care			Present Value		
		Premium	Costs	MLR	Premium	HCC	MLR
2000	81,139	\$8,784,820	\$5,950,110	68%	\$13,981,185	\$9,410,325	67%
2001	199,235	\$16,071,274	\$10,975,946	68%	\$24,316,529	\$16,536,046	68%
2002	342,597	\$27,890,148	\$19,977,574	72%	\$40,237,776	\$28,659,725	71%
2003	777,222	\$75,461,544	\$54,680,172	72%	\$103,468,197	\$74,550,790	72%
2004	933,980	\$101,819,993	\$67,960,428	67%	\$133,398,868	\$88,487,252	66%
2005	850,903	\$103,769,724	\$74,547,799	72%	\$129,517,963	\$92,409,590	71%
2006	852,976	\$111,346,864	\$81,186,168	73%	\$132,244,900	\$95,733,687	72%
2007	891,929	\$125,275,201	\$104,134,605	83%	\$141,757,117	\$117,004,174	83%
2008	776,872	\$123,052,748	\$107,852,908	88%	\$132,710,990	\$115,636,907	87%
2009	556,253	\$102,821,945	\$86,193,201	84%	\$105,639,469	\$87,971,405	83%
Total	6,263,106	\$796,294,261	\$613,458,911	77%	\$957,272,994	\$726,399,901	76%

Table 6
Future Anticipated Loss Ratio

Future

Year	Member Months	Health Care			Present Value		
		Premium	Costs	MLR	Premium	HCC	MLR
2010	446,096	\$93,110,534	\$79,710,319	86%	\$91,024,069	\$77,408,111	85%
2011	350,085	\$83,164,353	\$68,811,465	83%	\$77,535,667	\$63,697,584	82%
2012	242,869	\$63,464,486	\$52,360,621	83%	\$56,351,419	\$46,164,052	82%
2013	168,566	\$48,176,398	\$39,559,696	82%	\$40,743,878	\$33,217,922	82%
2014	116,952	\$36,099,205	\$29,731,703	82%	\$29,076,064	\$23,777,169	82%
2015	81,152	\$27,052,776	\$22,280,866	82%	\$20,752,048	\$16,970,068	82%
2016	56,292	\$20,266,665	\$16,691,697	82%	\$14,806,163	\$12,107,740	82%
2017	39,048	\$15,182,960	\$12,504,635	82%	\$10,563,994	\$8,638,634	82%
2018	27,088	\$11,375,346	\$9,368,944	82%	\$7,537,798	\$6,164,145	82%
2019	18,802	\$8,527,341	\$7,023,257	82%	\$5,381,515	\$4,400,803	82%
2020	13,048	\$6,391,121	\$5,263,839	82%	\$3,841,305	\$3,141,281	82%
Total	1,559,998	\$412,811,185	\$343,307,041	83%	\$357,613,919	\$295,687,507	83%

	Lifetime Loss Ratio (PV)			
	Membership	Premium	HCC	MLR
Past	6,263,106	\$957,272,994	\$726,399,901	76%
Future	1,559,998	\$357,613,919	\$295,687,507	83%
Total	7,823,104	\$1,314,886,913	\$1,022,087,408	78%

Note that this demonstration is based on projected premium increases above trend for rate increases effective in 2011 and 2012 and trend increases for each year thereafter. We believe that these assumptions along with the assumption of a flat loss ratio index are conservative assumptions that result in a conservative estimate of the lifetime loss ratio. Despite these conservative assumptions, the projected lifetime and future loss ratios are well above the 70 percent requirement.

Length of Time in Plan	Claim Index	Premium Index	Loss Ratio Index
Year 1	1.000	1.000	1.000
Year 2	1.000	1.000	1.000
Year 3	1.000	1.000	1.000
Year 4+	1.000	1.000	1.000

Rating Region

The rating region for all of the Salud Affordable IFP PPO plans are defined by the following counties: Los Angeles, Orange, and Ventura.

Rate Adjustments

These rates apply only to insureds who are underwritten into the standard rating tier. Rates of 120% and 150% of the attached rates are also available for insureds who are underwritten into one of the substandard tiers.

Beginning September 1, 2010 rates ranging from 110% to 200% of the attached rates for these plans will be available for insureds who are underwritten into one of the substandard tiers.

Actuarial Certification

In my opinion, the enclosed rates are reasonable in relation to the anticipated experience of Health Net Life Insurance Company, and are neither excessive, inadequate, nor unfairly discriminatory.

Sincerely,

Mark E. Bean

Mark E. Bean, ASA, MAAA
11971 Foundation Place
Rancho Cordova, CA 95670
Phone: (916) 935-1102
Fax: (916) 935-4407

July 12, 2010

Date

Exhibit 1
HEALTH NET LIFE INS. CO.
Individual PPO Plans
Rating Region 1
Los Angeles, Orange, and Ventura Counties

		Proposed Rates - Effective September 1, 2010						Current Rates - Effective July 1, 2009						Without Dental & Vision			With Dental & Vision		
		Without Dental & Vision Salud Affordable			With Dental & Vision Salud Affordable			Without Dental & Vision Salud Affordable			With Dental & Vision Salud Affordable			Without Dental & Vision Salud Affordable			With Dental & Vision Salud Affordable		
Tier	Age	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO	IFP PPO
		15	25	15-75%	15	25	15-75%	15	25	15-75%	15	25	15-75%	15	25	15-75%	15	25	15-75%
Subscriber	0	243	199	165	268	224	190	203	166	138	228	191	163	20%	20%	20%	18%	17%	17%
	1 - 4	160	132	110	185	157	135	134	110	92	159	135	117	19%	20%	20%	16%	16%	15%
	5 - 18	160	132	110	185	157	135	134	110	92	159	135	117	19%	20%	20%	16%	16%	15%
	19 - 24	178	146	122	203	171	147	149	122	102	174	147	127	19%	20%	20%	17%	16%	16%
	25 - 29	178	146	122	203	171	147	149	122	102	174	147	127	19%	20%	20%	17%	16%	16%
	30 - 34	178	146	122	203	171	147	149	122	102	174	147	127	19%	20%	20%	17%	16%	16%
	35 - 39	178	146	122	203	171	147	149	122	102	174	147	127	19%	20%	20%	17%	16%	16%
	40 - 44	216	170	146	241	195	171	180	142	122	205	167	147	20%	20%	20%	18%	17%	16%
	45 - 49	280	214	183	305	239	208	234	179	153	259	204	178	20%	20%	20%	18%	17%	17%
	50 - 54	357	274	235	382	299	260	298	229	196	323	254	221	20%	20%	20%	18%	18%	18%
	55 - 59	517	396	340	542	421	365	431	330	284	456	355	309	20%	20%	20%	19%	19%	18%
	60 - 64	654	498	429	679	523	454	545	415	358	570	440	383	20%	20%	20%	19%	19%	19%
	65+	784	597	514	809	622	539	654	498	429	679	523	454	20%	20%	20%	19%	19%	19%
Sub & Spouse	19 - 24	361	295	244	411	345	294	301	246	204	351	296	254	20%	20%	20%	17%	17%	16%
	25 - 29	361	295	244	411	345	294	301	246	204	351	296	254	20%	20%	20%	17%	17%	16%
	30 - 34	361	295	244	411	345	294	301	246	204	351	296	254	20%	20%	20%	17%	17%	16%
	35 - 39	361	295	244	411	345	294	301	246	204	351	296	254	20%	20%	20%	17%	17%	16%
	40 - 44	434	343	295	484	393	345	362	286	246	412	336	296	20%	20%	20%	17%	17%	17%
	45 - 49	564	432	369	614	482	419	470	360	308	520	410	358	20%	20%	20%	18%	18%	17%
	50 - 54	717	550	471	767	600	521	598	459	393	648	509	443	20%	20%	20%	18%	18%	18%
	55 - 59	1,035	793	681	1,085	843	731	863	661	568	913	711	618	20%	20%	20%	19%	19%	18%
	60 - 64	1,309	997	859	1,359	1,047	909	1,091	831	716	1,141	881	766	20%	20%	20%	19%	19%	19%
	65+	1,572	1,197	1,030	1,622	1,247	1,080	1,310	998	859	1,360	1,048	909	20%	20%	20%	19%	19%	19%
Sub & Child	19 - 24	408	333	276	458	383	326	340	278	230	390	328	280	20%	20%	20%	17%	17%	16%
	25 - 29	408	333	276	458	383	326	340	278	230	390	328	280	20%	20%	20%	17%	17%	16%
	30 - 34	391	320	266	441	370	316	326	267	222	376	317	272	20%	20%	20%	17%	17%	16%
	35 - 39	374	306	255	424	356	305	312	255	213	362	305	263	20%	20%	20%	17%	17%	16%
	40 - 44	385	308	261	435	358	311	321	257	218	371	307	268	20%	20%	20%	17%	17%	16%
	45 - 49	444	348	296	494	398	346	370	290	247	420	340	297	20%	20%	20%	18%	17%	16%
	50 - 54	520	408	346	570	458	396	434	340	289	484	390	339	20%	20%	20%	18%	17%	17%
	55 - 59	680	529	452	730	579	502	567	441	377	617	491	427	20%	20%	20%	18%	18%	18%
	60 - 64	816	630	541	866	680	591	680	525	451	730	575	501	20%	20%	20%	19%	18%	18%
	65+	948	730	626	998	780	676	790	609	522	840	659	572	20%	20%	20%	19%	18%	18%
Sub & Children	19 - 24	586	478	399	661	553	474	489	399	333	564	474	408	20%	20%	20%	17%	17%	16%
	25 - 29	586	478	399	661	553	474	489	399	333	564	474	408	20%	20%	20%	17%	17%	16%
	30 - 34	553	453	378	628	528	453	461	378	315	536	453	390	20%	20%	20%	17%	17%	16%
	35 - 39	537	439	366	612	514	441	448	366	305	523	441	380	20%	20%	20%	17%	17%	16%
	40 - 44	547	440	373	622	515	448	456	367	311	531	442	386	20%	20%	20%	17%	17%	16%
	45 - 49	606	482	408	681	557	483	505	402	340	580	477	415	20%	20%	20%	17%	17%	16%
	50 - 54	684	541	459	759	616	534	570	451	383	645	526	458	20%	20%	20%	18%	17%	17%
	55 - 59	843	662	564	918	737	639	703	552	470	778	627	545	20%	20%	20%	18%	18%	17%
	60 - 64	979	763	651	1,054	838	726	816	636	543	891	711	618	20%	20%	20%	18%	18%	17%
	65+	1,110	865	738	1,185	940	813	925	721	615	1,000	796	690	20%	20%	20%	19%	18%	18%
Family	19 - 24	768	627	522	868	727	622	640	523	435	740	623	535	20%	20%	20%	17%	17%	16%
	25 - 29	768	627	522	868	727	622	640	523	435	740	623	535	20%	20%	20%	17%	17%	16%
	30 - 34	734	602	500	834	702	600	612	502	417	712	602	517	20%	20%	20%	17%	17%	16%
	35 - 39	717	586	489	817	686	589	598	489	408	698	589	508	20%	20%	20%	17%	16%	16%
	40 - 44	766	613	520	866	713	620	639	511	434	739	611	534	20%	20%	20%	17%	17%	16%
	45 - 49	889	697	594	989	797	694	741	581	495	841	681	595	20%	20%	20%	18%	17%	17%
	50 - 54	1,042	816	694	1,142	916	794	869	680	579	969	780	679	20%	20%	20%	18%	17%	17%
	55 - 59	1,362	1,058	904	1,462	1,158	1,004	1,135	882	754	1,235	982	854	20%	20%	20%	18%	18%	18%
	60 - 64	1,634	1,263	1,083	1,734	1,363	1,183	1,362	1,053	903	1,462	1,153	1,003	20%	20%	20%	19%	18%	18%
	65+	1,897	1,462	1,252	1,997	1,562	1,352	1,581	1,219	1,044	1,681	1,319	1,144	20%	20%	20%	19%	18%	18%